Iowa Department of Public Health Division of Acute Disease Prevention & Emergency Response Immunization Program

Vaccines for Children (VFC) Program Varicella Vaccine Management

Proper management of varicella -containing vaccine is important to protect vaccine viability. Adhering to proper storage and handling procedures will minimize the potential for varicella vaccine loss and wastage. Prior to the distribution of varicella-containing vaccine (Varivax, ProQuad) appropriate freezer storage must be verified. The attached survey is used to determine if your clinic is able to properly store varicella-containing vaccine. After monitoring and recording freezer temperatures for five days, please fax the completed survey to: Tina Patterson, VFC Program Coordinator at 1-800-831-6292, or scan and email to tina.patterson@idph.iowa.gov.

IMPORTANT

All varicella-containing vaccine should be stored in a continuous frozen state at the manufacturer recommended temperature until administered. Varicella-containing vaccines should be stored between - 15°C to no colder than - 50°C or between +5°F to no colder than - 58°F. Please begin monitoring your freezer to determine if this temperature range can be maintained. If you have a combination refrigerator freezer, please be aware as the temperature is lowered in the freezer, it is important to ensure the refrigerator temperature does not drop below the acceptable 2 through 8°C or 35 through 46°F range. The Centers for Disease Control and Prevention (CDC) recommends stand-alone freezers (either manual defrost or automatic defrost) are usually effective at maintaining temperatures required for vaccine storage. Single-purpose units are less expensive alternatives to medical specialty equipment and are preferable to combination units. A combination refrigerator-freezer unit sold for home use might be adequate for storing limited quantities of vaccines if refrigerator and freezer compartments have separate external doors.

All VFC varicella-containing vaccine orders will be shipped directly from the manufacturer, Merck. Satellite clinics will need to enroll separately and must be capable of receiving vaccine shipments and properly storing varicella-containing vaccine. CDC and the vaccine manufacturer do not recommend transporting varicella-containing vaccines. If varicella-containing vaccines must be transported, CDC recommends transport with a portable freezer unit that maintains temperatures between - 15°C and no colder than - 50°C or +5°F and no colder than - 58°F. Portable freezers may be available for rent in some places. According to the manufacturer's product information, varicella-containing vaccines may be stored between 35°F and 46°F (2°C and 8°C) for up to 72 continuous hours prior to reconstitution. If varicella-containing vaccines must be transported between 35°F and 46°F (2°C and 8°C) complete the following actions:

- 1. Place a calibrated thermometer in the container as close as possible to the vaccine.
- 2. Record the following:
 - a. The time refrigerator storage began
 - b. The time refrigerator storage ended
 - c. Storage temperature during transport

3. Immediately upon arrival at the alternate storage facility:

- a. Place the vaccine in the freezer between -58°F and +5°F (-50°C and -15°C). Any freezer that has a separate sealed freezer door and reliably maintains a temperature between -58°F and +5°F (-50°C and -15°C) is acceptable for storage of varicella containing vaccines.
- b. Document the time the vaccine was removed from the container and placed in the alternate storage unit.
- c. Note that this is considered a temperature excursion and contact the Iowa Immunization Program (800-831-6293) and the manufacturer (1-800-637-2590) for further guidance.
- 4. Do not discard vaccine without contacting the manufacturer and the lowa Immunization Program (800-831-6293) for guidance.

Use of dry ice is not recommended, even for temporary storage. Dry ice may subject varicella-containing vaccine to temperatures colder than - 58° F (- 50° C).

Iowa Department of Public Health Division of Acute Disease Prevention & Emergency Response Immunization Program



Facility Name:Contact Person:			VFC PIN:		
			Phone:	()	
Special D	elivery Instructi	ons:			
-					
		Please comple	ete the following inf	ormation for you	r facility
-	ur facility preser No		-containing vaccine?		
2. Reco	rd the temperat	cure of the refrigera	tor (if a combination	unit) and freezer	for five days.
		_	Temperature	Freezer Temperature	
		(Fahrenhei	(Fahrenheit or Celsius)		or Celsius)
		AM	PM	AM	PM
Date	e:				
Date	e:				
Date	e:				
Date	e:				
Date	2:				
	Standard fluid Continuous Re Min-Max type of freezer Combination re Stand alone free	filled cording unit will you use to efrigerator/freezer veezer	evice does your facili	ontaining vaccine ors	
Yes_	No		freezer and refrigera		?
i certify ti	ne information i	inciuaea in this surv	rey is accurate and co	impiete.	
):		D	ate.	
Signature	•			utc	

H:VFC/Forms/Varicella survey Dec 2011

VFC Program at 1-800-831-6292